## FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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ı	OMR	Num
Į	Expir	ec.

April 30, 2008

Estimated average burden hours per response 16.00

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



Name of Offer	ng do check if this is an amo	endment and name has	changed, and ind	icate change	e.)					
Secured conv	ertibles notes (convertible in	to shares of common	n stock) and war	rants to pu	rchase shares of	common stock				
Filing Under	(check box(es) that apply):	☐ Rule 504	☐ Rule 505	☑ Rule	506 □ Sec	ction 4(6)  ULOE				
Type of Filing:	✓ New Filing	☐ Amendment								
	and the second s	A. BASIC IDE	NTIFICATION	DATA		2040 (1944) 200 (1944)				
1. Enter the in	formation requested about the is	suer								
Name of Issuer	( check if this is an amend	lment and name has ch	nanged, and indica	ite change.)						
Kiwa Bio-Teo	ch Products Group Corporati	on								
						er (Including Area Code)				
415 West Foothill Blvd., Suite 206, Claremont, California 91711-2766 (909) 626-2358										
Address of Prin	Address of Principal Business Operations (Number and Street, City, State, Zip Code)  Telephone Number (Including Area Code)									
(if different fro										
(if different from Executive Offices) A516 Tadley Plaza, A1# Wai Guan Xie Jie, Andingmen Wai, Chaoyang District, (011) (8610) 8528-6177										
Beijing, Chin	a 100011									
Brief Descripti	on of Business									
Development	and distribution of bio-techr	ological products fo	or agricultural, n	atural resor	urces and enviro					
Type of Busine	ss Organization									
☑ corporation	☐ limited partne	ership, already formed	□ oth	er (please sp	ecify):	- Alle @ @ cooo				
☐ business tru	st 🔲 limited partne	ership, to be formed	···			PAUDUZZINK				
			Month Year	-		THOMSON				
Actual or Estin	nated Date of Incorporation or C	Organization:	0   6     3   3	3   ☑ Actu	al 🗆 Estimated					
Jurisdiction of	Incorporation or Organization:	(Enter two-letter U.S.	Postal Service abl	breviation fo	or State:	Financial				
		CN for Canada; FN	I for foreign jurisc	diction)	D	E				

### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq.

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☑ Executive Officer ☑ Director ☐ General and/or Managing Partner	r
Full name (Last name first, if individual)	
Wei Li	
Business or Residence Address (Number and Street, City, State, Zip Code)	
6 Hao Lou, #1805, Dao Xiang Yuan, Hai Dian Qu, Beijing, China, 100086	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner	
Full name (Last name first, if individual)	
Lian Jun Luo	
Business or Residence Address (Number and Street, City, State, Zip Code)	
302 Hao Lou, #1041, Hui Zhong Li Xiao Qu, Chao Yang Qu, Beijing, China, 100101	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner	
Full name (Last name first, if individual)	
Yun Long Zhang	
Business or Residence Address (Number and Street, City, State, Zip Code)	
1 Hao Lou, 708, Guang Qu Lu #21, Chao Yang Qu, Beijing, China, 100022	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner	
Full name (Last name first, if individual)	
Da Chang Ju	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Jia 5 Lou, 1 Men, #401, San Li He San Qu, Xi Cheng Qu, Beijing, China, 100045	
Check Box(es) that Apply:	
Full name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Dustiness of Residence Address (Address	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner	
Full name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner	
Full name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: $\square$ Promoter $\square$ Beneficial Owner $\square$ Executive Officer $\square$ Director $\square$ General and/or Managing Partner	
Full name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)	

9	100		186	B. IN	FORMA'	TION ABOU	JT OFFER	ING				
											Yes	No
I. Has th	ie issuer sol	d, or does th						-		······································	🗆	$\square$
2 What	المراسية المام					n 2, if filing					¢ NO	ur.
Z. What	is the minin	ium investr	nent that w	iii be accept	ed from an	y maividual:			• • • • • • • • • • • • • • • • • • • •		<u>\$ NO1</u>	VE
											Yes	No
3. Does t	the offering	permit join	t ownershij	o of a single	unit?						🗆	
										directly, any		
										e offering. It		
states,	list the nar	ne of the b	roker or de	ealer. If mo	re than fiv	e (5) person	s to be list			ons of such a		
				nformation f	or that bro	ker or dealer	only.			<del></del>		
	(Last name		ividual)									
	ital Markets		Niverale au ou	d Street, City	State 7:	- Codo			<del></del>			<del></del>
	or Residence	•			y, State, Zi	p Code)						
	Associated F			102/1	<del></del>	<del></del>		<del></del>	·····	<del> </del>	<del></del>	
N/A	_								_			
States in \	Which Perso	n Listed H	as Solicited	or Intends t	o Solicit P	ırchasers						
•				States)								All States
[AL]	[AK]	[AZ]	[AR]	☑ [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
☑ [IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[N1]	[NM]	$\square$ [NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full name	(Last name	first, if ind	lividual)									
Business	or Residenc	e Address (	Number an	d Street, City	y, State, Zi	p Code)						
Name of A	Associated I	Broker or D	ealer									
States in V	Which Perso	n Listed H	as Solicited	or Intends t	o Solicit P	urchasers						
				States)								All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full name	(Last name	first, if ind	lividual)	······································	•							
			···-							·		
Business	or Residenc	e Address (	Number an	d Street, Cit	y, State, Zi	p Code)						
Name of	Associated I	Broker or D	ealer									
States in '	Which Perso	n Listed H	as Solicited	or Intends t	o Solicit P	urchasers						
•				States)				••••				All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	_[VT]_	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		Aggregate	Am	ount Already
	Type of Security	C	Offering Price		Sold
	Debt	\$	0	\$	0
	Equity	\$	0	\$	0
	□ Common □ Preferred				
	Convertible Securities (including warrants)	\$	2,450,000	\$	857,500
	Partnership Interests	\$	0	\$	0
	Other (Specify:)	\$	0	\$	0
	Total	\$	0	\$	0
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors	Do	Aggregate ollar Amount f Purchasers
	Accredited Investors		6	\$	857,500
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)	_		\$	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		-		
	Type of offering		Type of Security	Do	ollar Amount Sold
	Rule 505		•	\$	Doid
	Regulation A			\$	
	Rule 504	_	····	\$	
	Total	_		\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not				
	known, furnish an estimate and check the box to the left of the estimate.		_		
	Transfer Agent's Fees		_	\$	
	Printing and Engraving Costs			\$	
	Legal Fees		☑	\$	25,000
	Accounting Fees			\$	····-
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify) Placement Agent Finder's Fees		$\square$	\$	196,000
	Total		$\square$	\$	221,000

	C. OFFERING PRICE,	NUMBER (	OF INVESTO	RS, EXPENSES AN	ND USE (	OF PROCEEDS			
	b. Enter the difference between the aggre Question I and total expenses furnished in r the "adjusted gross proceeds to the issuer."	response to P	art C - Questi	on 4.a. This differe	nce is		\$		2,229,000
5.	Indicate below the amount of the adjusted gr for each of the purposes shown. If the amound check the box to the left of the estima adjusted gross proceeds to the issuer set forth	ant for any pute. The total	urpose is not l l of the paym	known, furnish an est ents listed must equ	timate				
						Payments to Officers, Directors, & Affiliates			ents to hers
	Salaries and fees				🗆			\$	0
	Purchase of real estate		•••••		🗆			\$	0
	Purchase, rental or leasing and installation of	machinery a	nd equipment		🗆			\$	0
	Construction or leasing of plant buildings and	d facilities	•••••		🗆			\$	0
	Acquisition of other businesses (including the may be used in exchange for the assets or sec						_		
	, c		•	<b>3</b> ,			_ 🗆	\$	0
	Repayment of indebtedness				🗆			\$	400,000
	Working capital						_ 🗹		1,829,000
Ot	ner (specify):		•••••		🗆		_ 🗆	\$	0
	Column totals				🗆		_ 🗆		
То	tal Payments Listed (column totals added)				🗆		_ 🗆	<u>\$</u>	2,229,000
		D.	FEDERAL S	IGNATURE	Wiesa.				<del></del>
sig	e issuer has duly caused this notice to be signer mature constitutes an undertaking by the issue formation furnished by the issuer to any non-a	ed by the und or to furnish to	ersigned duly the U.S. Sec	authorized person. I	f this noti	sion, upon writte			
Ki	uer (Print or Type) wa Bio-Tech Products Group Corporation	Signature	UM	1.	Date	07-11	4-	Σ€	06
	me of Signer (Print or Type) ei Li		ner (Print or T nd Chief Exec						

# ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
		Yes	No
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?		
	See Appendix, Column 5, for state response.		
_			

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understand that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Kiwa Bio-Tech Products Group Corporation	Signature ( , ,	Date 07-14-2006
Name of Signer (Print or Type)	Title of Signer (Print or Type)	· · · · · · · · · · · · · · · · · · ·
Wei Li	President and Chief Executive Officer	

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

1	:	2	3	- <del></del>		5			
	to non-a	ed to sell eccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		under ULOE att explan waiver	ification r State (if yes, ach ation of granted) -Item 1)			
State	Yes	No	Secured convertible notes (convertible into common shares) and warrants (to purchase common shares)	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
СО				L- 11.					
СТ				<del>-,</del>					
DE									
DC									
FL									
GA				·					
HI									
ID									
IL		X	\$2,450,000	1	\$105,000	0	0		Х
IN									
IA									
KS									
KY									
LA									
ME							_		<u> </u>
MD									
MA									
MI									
MN									
MS									
МО									
MT									

APPENDIX

1	,	2	3			4		5		
	to non-a	ed to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount purc	nvestor and hased in State -Item 2)		under Sta (if yes explan waiver	ification ate ULOE , attach ation of granted) -Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
NE					<u> </u>					
NV							·		-	
NH										
NJ					<u> </u>					
NM										
NY		Х	\$2,450,000	3	\$273,000	0	0		Х	
NC										
ND										
ОН										
OK										
OR										
PA										
RI										
SC										
SD										
TN										
TX										
UT										
VT										
VA										
WA										
WV										
WI										
WY										

<u>Note</u>: One overseas accredited investor from British Virgin Islands purchased the offered securities in the amount of \$52,500. In addition, one overseas accredited investor from Cayman Islands purchased the offered securities in the amount of \$427,000.